

Application Data Sheet

Application Information

Filing Date::	10/14/2003
Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	None
CD-ROM or CD-R?::	None
Title::	LIQUID INFUSION APPARATUS FOR RADIOFREQUENCY TISSUE ABLATION
Attorney Docket Number::	267/296 (01-402)
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figures::	6
Total Drawing Sheets::	5
Small Entity::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Robert F.

Family Name:: Rioux
City of Residence:: Ashland
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 20 Woodridge Lane
City of mailing address:: Ashland
Country of mailing address:: US
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 01721
Applicant Authority type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Robert
Family Name:: Garabedian
City of Residence:: Mountain View
State or Province of Residence:: CA
Country of Residence:: US
Street of mailing address:: 1691 Notre Dame Dr.
City of mailing address:: Mountain View
Country of mailing address:: US
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94040
Applicant Authority type:: Inventor

Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Christopher
Family Name:: Pearson
City of Residence:: North Grafton
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 23 Bridle Ridge Dr.
City of mailing address:: North Grafton
Country of mailing address:: US
State or Province of mailing address:: MA
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Correspondence Information

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Representative Information

Representative Customer Number:: 23639

Representative Designation::	Registration Number::	Name::
Primary	37,104	David T. Burse

Assignee Information

Name:: Scimed Life Systems, Inc.

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